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CHARLES P. SAMMUT
350 WOODSIDE AVENUE, MILL VALLEY, CA 94941-3822
415-383-8431

Address to:

Box Patent Application
Commissioner for Patents
Washington, D.C. 20231

Attorney's Docket No. SONY-T1084

First Named Inventor Seiichi Aoyagi

UTILITY PATENT APPLICATION TRANSMITTAL
(under 37 CFR 1.53(b))

SIR:

Transmitted herewith for filing is the patent application entitled:
INFORMATION PROCESSING APPARATUS, INFORMATION PROCESSING METHOD, AND
STORAGE MEDIUM

CERTIFICATION UNDER 37 CFR § 1.10

I hereby certify that this New Application and the documents referred to as enclosed herein are being deposited with the United States Postal Service on this date JANUARY 19, 2001, in an envelope bearing "Express Mail Post Office To Addressee" Mailing Label Number EK916796635US addressed to: Box Patent Application, Commissioner for Patents, Washington, D.C. 20231.

CHARLES P. SAMMUT

(Name of person mailing paper)

(Signature)

Enclosed are:

1. ☒ Transmittal Form (two copies required)
2. The papers required for filing date under CFR § 1.53(b):
 - i. 50 Pages of specification (including claims and abstract);
 - ii. 13 Sheets of drawings.
☐ formal ☒ informal
3. Declaration or oath
 - a. ☒ Unsigned - Combined with Power of Attorney

ACCOMPANYING APPLICATION PARTS

4. ☐ An assignment of the invention to is attached (including Form PTO-1595).
 - i. ☐ 37 CFR 3.73(b) Statement (when there is an assignee)
5. ☒ Power of Attorney - Unsigned - Combined with Declaration
6. ☐ An Information Disclosure Statement (IDS) is enclosed, including a PTO-1449 and copies of ☐ references.
7. ☐ Preliminary Amendment.
8. ☒ Return Receipt Postcard (MPEP 503 -- should be specifically itemized)
9. ☐ Other
10. FOREIGN PRIORITY
 - [X] Priority of application no. P2000-015265 filed on January 25, 2000 in Japan is claimed under 35 USC 119.

The certified copy of the priority application:

- ☒ is filed herewith; or
☐ has been filed in prior application no. ☐ filed on ☐, or
☐ will be provided.

___ English Translation Document (if applicable)

11. FEE CALCULATION

- a. ___ Amendment changing number of claims or deleting multiple dependencies is enclosed.

CLAIMS AS FILED

	Number Filed	Number Extra	Rate	Basic Fee (\$710)
Total Claims	11 - 20	* 0	x \$18.00	0
Independent Claims	3 - 3	* 0	x \$80.00	0
___ Multiple dependent claim(s), if any			\$270.00	0

*If less than zero, enter "0".

Filing Fee Calculation \$710.00

50% Filing Fee Reduction (if applicable) \$

12. Small Entity Status

- a. ___ A small entity statement is enclosed.
b. ___ A small entity statement was filed in the prior nonprovisional application and such status is still proper and desired.
c. ___ is no longer claimed.

13. Other Fees

- ___ Recording Assignment [\$40.00] \$
___ Other fees
Specify _____ \$

Total Fees Enclosed \$

14. Payment of Fees

- ___ Check(s) in the amount of \$__ enclosed.
___ Charge Account No. 12-1420 in the amount of \$__.
A duplicate of this transmittal is attached.

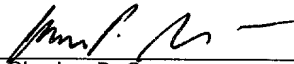
15. All correspondence regarding this application should be forwarded to the undersigned attorney:

Charles P. Sammut
Attorney at Law
350 Woodside Avenue
Mill Valley, CA 94941-3822
Telephone: 415-383-8431
Facsimile: 415-388-7539

JANUARY 19, 2001
(Date)

Attorney Docket No. SONY-T1084
[S01P0084US00]

By: _____


Charles P. Sammut
Registration No. 28,901
Attorney for Applicant